

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000066623

Entity Name: CITY HEALTH, INC.

FILED
Jan 30, 2004
Secretary of State

Current Principal Place of Business:

1401 S.W. 1ST STREET, SUITE 101
MIAMI, FL 33135

New Principal Place of Business:

Current Mailing Address:

1401 S.W. 1ST STREET, SUITE 101
MIAMI, FL 33135

New Mailing Address:

FEI Number: 65-1030337

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CABRERA, ANIANO N
1800 S.W. 1ST STREET
SUITE 102
MIAMI, FL 33135 US

Name and Address of New Registered Agent:

CABRERA, ANIANO N
975 IBIS AVENUE
MIAMI SPRINGS, FL 33166 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

01/30/2004

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CABRERA, ANIANO N
Address: 975 IBIS AVE
City-St-Zip: MIAMI SPRINGS, FL 331663211

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANIANO N. CABRERA

D

01/30/2004

Electronic Signature of Signing Officer or Director

Date